

SERVICE SPECIFICATION

Name of Service: Harrow Mutual Support Networks (HMSN)

Duration of contract: Anticipated start date for service tbc

SERVICE DESCRIPTION

London Borough of Harrow wish to appoint an organisation that can establish a model of service delivery for vulnerable and older people called the Harrow Mutual Support Networks (HMSN), a membership organisation whereby users purchase support and services through a network of paid and volunteer helpers. Within 3 years after being established the HMSN would aim to be self-supporting and self-financing. A key strength of the model is that as well as focussing on service delivery, it also stresses social contact: the interaction between members of the organisation. It therefore promises to build social capital and community capacity and supports personalisation.

(Please note that HMSN is a descriptive working title: the successful provider will be expected to identify a name for the organisation.)

Service Aims:

1. It should tackle social isolation amongst older people and vulnerable groups.
2. It should target those vulnerable and older people and people with a disability who currently have preventative-type needs.
3. It should be able to meet the needs of up to 2000 older and vulnerable people (this includes both FACS and non-FACS eligible), plus others less vulnerable. The service steering group will define specific eligibility criteria in line with Harrow Strategic Partnership strategic priorities.
4. It should allow people to be both users and helpers within the membership organisation.
5. It should become self-sustainable within three years and be self-funding thereafter.
6. It should have borough coverage within first year of delivery and specifically target wards with lower life expectancy.
7. It should target appropriate community groups to ensure the make up of the volunteers reflects the diversity of LB Harrow.

8. It will reach people that currently are not involved with Local Authority and statutory partners, as they are not meeting statutory eligibility criteria.

1. STRATEGIC RELEVANCE

London Borough of Harrow Vision: “Working Together: Our Harrow, Our Community”

Priorities:

- Keeping neighbourhoods clean, green and safe
- United and involved communities: a Council that listens and leads
- Supporting and protecting people who are most in need
- Supporting our Town Centre, our local shopping centres and businesses

Our vision is that we will empower and support the people of Harrow to take responsibility and control for meeting their own care and support needs. We wish to support the community to be healthy, caring, and creative.

Our role will be to facilitate the achievement of community and individual outcomes through nurturing community support and engagement, brokering links and fostering informal networks.

The removal of targets and performance frameworks at the level of central government has been extensive, with a roll back of regulatory burdens in most sectors. The council is committed to ensuring that decision making, funding and accountability are firmly embedded at a local and neighborhood level, and that local people have increasing control over the priorities for their area, including opportunities to shape and even deliver services to meet those priorities. The localism agenda takes forward its commitment to devolve power, choice and responsibility for decision making about local services to the local and neighbourhood level. It aims to ensure that local services are developed and improved in response to locally identified priorities.

Devolving decision making in this way is also seen as a means of ensuring that services are more carefully tailored to local needs and therefore able to deliver greater value for money and efficiencies. The policy commitment to transforming public services, apart from being focused on greater local responsiveness and accountability, is also to be achieved by encouraging a diversity of providers locally, hopefully also resulting in improved quality of services at lower costs. The drive for savings has become more acute with the overarching priority for government being the goal of reducing the public deficit.

A Vision for Adult Social Care: Capable Communities and Active Citizens and the Partnership Agreement led by the social care sector, *Think Local, Act Personal* calls for a whole population, community-based approach. The Partnership Agreement encourages councils and their partners to:

Encourage and help local communities and groups to provide networks of support, to help people improve their health and well-being, and to reduce their need for more acute care and health services.

Actively involve people, carers, families and communities in the design, development, delivery and review of innovative care and support arrangements to maximise choice and independence and utilise the widest range of resources.

Make and sustain evidence-based investments, which maximise existing community capacity, reduce demand and enhance well-being through primary, secondary and tertiary prevention. This may include support to local voluntary organisations and mutual self-help schemes; providing small community grants or business advice to social enterprises; and making best use of existing housing, leisure, library and other cultural services. It can also include work with providers to maximise and

sustain investment in the development of services providing greater choice, control and community connection.

Develop and facilitate workforce skills and activity to help people use their personal, family and community capacity.

1.1 Active and supportive communities - keeping friends, family and place

Investment in organised community activity and care and support, which involves and demonstratively supports people who use services, their families and carers

Effective programmes are available which maximise people's health and well-being and enable them to recover and stay well.

People are supported to access a range of activities to maintain independence, health and well-being (including public health and community)

Longer-term support and not just immediate crisis is considered and planned for. A shift in public resources away from crisis and acute systems towards supportive community activity is understood

Systems and organisational culture should support people who use services and carers to achieve and sustain employment.

1.2 Supporting a strategic shift to prevention and early intervention

Preventative services help people who may need a little bit of support to keep them living independently. The low-level support service for the vulnerable and older people will be one of several newly commissioned services designed to shift the emphasis of health and adult social care services towards preventing the onset of chronic health conditions and intervening early to contain these conditions once they arise.

In particular, the low-level support service would focus on primary prevention (maintaining independence, good health and promoting wellbeing) and some secondary prevention (screening and identifying individuals at risk of specific health conditions or events - such as strokes or falls – and support for those who have existing low-level social care needs) in the following ways:

Primary prevention – the service would help maintain independence, health and wellbeing by providing universal access to good quality information about local services, promoting health and active lifestyles, delivering practical services and on-demand help with small tasks, promoting a positive image of older people, and enabling social contact between older people.

Secondary prevention – the service would act as an 'early warning' system by putting mechanisms in place to ensure that those 'at risk' of suffering health related problems, strokes or falls are identified and referred to the appropriate agency as and when required.

1.3 Facilitating access to universal services

Universal services are local services that are important to everyone, not just those with social care needs, including transport, leisure, health services, housing services, libraries, information and guidance – services that support people to maintain a sense of health and wellbeing. We want to commission a service, which maximises access to universal services by:

- Coordinating up to date information about services available within the each neighbourhood
- Making this information available to vulnerable and older people through a variety of channels
- Supporting vulnerable older people to access the services of their choice

1.4 Ensuring people have greater choice and control over meeting their needs

People like to feel that they have choice and control over how they spend their money, how their support is delivered, knowing what is available locally and knowing that services are of good quality. The service will ensure that individuals have greater choice and control in meeting their needs by:

- Building in flexibility so that individuals can use the service to get the low-level support they want, when they want it
- Filling gaps in service provision where none of good quality exist or are accessible locally
- Making recommendations about reliable local services and providers

1.5 Building social capital within local areas

Being a part of the local community, having social contact and experiencing friendships is key to a good quality of life, health and wellbeing. 'Social capital' – which binds together people and communities - plays and will continue to play a key role in supporting a person's social care needs. The new service will build social capital by:

- Motivating and incentivising residents to 'give something back,' turning them into valued contributors by providing opportunities to use their skills, knowledge and expertise to help others to live independently – in many cases this would lead to employment opportunities
- Enabling regular social contact with like-minded individuals
- Promoting a positive image of vulnerable and older people
- Working with other service providers in an integrated way to tackle some of the key issues which prevent vulnerable and older people from living healthy, active lives

2. SERVICE DELIVERY

2.1 GENERAL SERVICE REQUIREMENTS

1. A key aspect of this service is that it will be a membership organisation, independent of the statutory partners and statutory eligibility criteria requirements and will support members to decide the full range of activities for themselves.
2. A steering group will be established and will oversee the project throughout the development of the HMSN. This will consist of: LB of Harrow councillors and officers; representatives of the successful provider organisation; partner organisations (including the third sector); members of the HMSN; employees of the HMSN.
3. The steering group will be responsible for the vision, marketing and implementation, taking a lead role in developing the identity of the service.
4. The HMSN will be set up as a Community Interest Company (thereby ensuring that all assets of the company will be used for the benefit of the community).
5. Residents will choose to join the HMSN and pay a nominal membership fee.
6. Members will pay a small amount for help with support, services, activities or outings.
7. The support will be provided by a large pool of helpers, who may be volunteers or may receive some form payment for their work.

8. The hub of the HMSN will ensure that those who need the particular help or support are put in touch with those that can provide it.
9. The HMSN will provide the user with not only the help they need but an opportunity for meaningful social contact at the same time.
10. Members will also be able to make or request recommendations on other trades-people they wish to employ.
11. A wide range of support will be provided, from the lower-level (e.g. lawn cutting) to higher levels of personal care.
12. A range of activities and outings will also be available for members.
13. The provider will be expected to work alongside existing Shop4Support (S4S) system, Neighborhood Champions and other voluntary services and to ensure there is an effective way to work together.

HMSN – EXAMPLES OF THE HELP PROVIDED CAN INCLUDE:

(Please note, that examples below are suggestions based on similar services being delivered across the UK, fully detailed description of the future service functions and activities can only be determine by the future members and steering group of the service)

To contribute fully to the delivery of these objectives, the low-level support service will need to do the following:

- Support - as a minimum, the service should be run in such a way as to ensure that the following types of low-level in-home support are available on a flexible basis to service recipients, with the possibility to expand and adapt this list according to demand.
 - *laundry (washing, hanging out, drying, ironing etc)*
 - *cleaning gardening*
 - *home maintenance (fixtures and fittings, changing light bulbs, painting, assembling flat pack furniture etc where the service user has purchased the materials)*
 - *technological support (mobile phones, computers, internet etc)*
 - *shopping in the local area*
 - *'odd jobs' – for example posting letters, clearing cupboards and lofts*
 - *learning new skills (how to text or use the internet, learn to cook, speak a language)*
 - *socialising (introductions, get-togethers, lift-sharing, forming interest groups)*
 - *assisting to make appointments with GPs and accompany service user to appointments as necessary*
- Empower - The service should be designed to provide opportunities for resourceful, skilled people within the local area to help others to live independently by delivering some elements of low-level in-home support themselves. Their input would need to be secured through a mixture of enabled volunteering and paid employment opportunities, with training and supervision provided to a standard consistent with the Council's minimum safeguarding requirements.

- Reward – volunteering should be encouraged and structures put in place to facilitate this. However all skilled member's who also give their time to help others should be offered an appropriate reward – even if they choose not to accept it - to secure their continued input and to maintain the professionalism and reliability of the service. Possible incentive models include a 'time bank' arrangement whereby an hour of time sharing a skill is rewarded with a free hour of additional support, or a waged service whereby those sharing their skills and expertise are paid a small sum for their time.
- Intervene - the service should incorporate a mechanism for identifying where interventions for users 'at risk' of specific health conditions or events (for example strokes or falls) are appropriate, and overseeing referrals to other services as and when needed.
- Inform - the service should operate as a single point of contact or 'information hub' – i.e.: members should be able to find out about information about the full range of services on offer in their local area and be supported to decide which one is right for them. They should also be offered support to access these services.
- Recommend - the service should provide information on reliable local service providers such as plumbers, electricians, cleaners, carers etc for all members. Mechanisms should be developed to allow this database to be continuously updated with service user views on the service received from each provider, thus allowing the development of a list of the most 'tried and tested' service providers to be compiled over time.
- Advice - the service should provide expert advice and information on a range of practical issues, from personal finance to technology, to local services.
- Connect – the service should enable users to make contact with other members with similar interests through the use of appropriate technology such as landline telephones, the Internet, mobile phones, rentable mobility scooters etc.

2.2 THE SUCCESSFUL PROVIDER ORGANISATION:

1. Will conduct comprehensive market research in London Borough of Harrow and draw up a business plan.
2. Will work to this business plan agreed by the steering group.
3. Will employ local people wherever possible.
4. Will engage with Residents, members of third sector organisations, local trades-people and other partners in developing the HMSN.
5. Will ensure that all its employees are appropriately trained, insured and have a full Criminal Records Bureau check.
6. Will encourage Residents with a range of support needs to become members of the HMSN.
7. Will develop a large pool of helpers providing a wide range of services and support.
8. Will develop a means to link those members requesting support with those people offering help and support. It is anticipated that this will require the development of a bespoke database for the purpose.

9. Will establish the HMSN as a Community Interest Company.
10. Will ensure the HMSN becomes operational within three months of the contract being awarded.

2.3 ELIGIBILITY

Membership of the HMSN will be open to all vulnerable and older residents of London Borough of Harrow, with specific targets and priorities areas. The steering group of the service will develop and agree the marketing strategy in line with Harrow Strategic Partnership strategic priorities.

2.4 SAFEGUARDING

The successful organisation will be required to ensure that all members of the HMSN are treated with dignity and safeguarded against harm. The organisation will therefore be required to put systems in place that ensure that all its employees and subsequent HMSN helpers:

1. Have a full Criminal Records Bureau check.
2. Are trained to complete the tasks required of them and have the appropriate certification where required.
3. Are appropriately insured for the role required

2.5 EQUALITY AND DIVERSITY

The successful organisation will ensure that the HMSN is developed and then established with the participation of all members of the community, reflecting the full diversity of London Borough of Harrow. In particular, it should ensure:

1. That all communities are aware of the HMSN and are able to access it.
2. That information regarding the HMSN is developed in appropriate languages and formats.
3. That all residents of London Borough of Harrow have the opportunity to join the HMSN.

3. CORE VALUES FOR SERVICE

The service must:

1. Work in partnership and/or co-operation with appropriate agencies
2. Demonstrate Best Value
3. Be delivered in accordance with Harrow Council's Equality and Diversity Policy
4. Be provided in an anti-discriminatory manner, including (but not limited to) taking into account gender, race, age, culture, religion, belief, language spoken, sexual orientation or disability
5. Be delivered in accordance with relevant legislation and best practice applicable to the client group, by suitably qualified and/or experienced staff
6. Promote and encourage the independence and well being of the individual members, taking account of his/her particular circumstances and chosen lifestyle
7. Maintain the service user's right to privacy, dignity and confidentiality
8. Ensure the health and safety of members, staff and others, and the protection of vulnerable people from abuse
9. Ensure members have the right to participate in decisions about the service provided to them and be regularly consulted about whether it meets their need
10. Be provided reliably and consistently

4. SERVICE OUTCOMES / PERFORMANCE INDICATORS

4.1 HMSN: An outcomes framework

Based on *Transparency in Outcomes: a framework for adult social care (Dept of Health 2010)*

LB Harrow will work in partnership with selected provider(s) to agree targets for membership in total and in specific areas.

Outcome 1	
Promoting personalisation and enhancing quality of life for vulnerable and older people and people with a disability	
Service Requirement	Supporting evidence
a) Enhancing members' independence through a full range of support, advice and activities available to them.	<ul style="list-style-type: none"> • The number and range of support, advice and activities that are available • The number and proportion of members commenting positively about range and quality of the support, advice and activities available
b) Ensuring members have control and manage their own support so that they can design what, how and when support is delivered to match their needs	<ul style="list-style-type: none"> • The number and proportion of members commenting positively about the degree of control they have in designing their own support
c) Enhancing the quality of life for members with a disability	<ul style="list-style-type: none"> • The number and proportion of members with a disability commenting positively about the support, advice and activities provided
d) Enhancing the quality of life for carers	<ul style="list-style-type: none"> • The number and proportion of carers of members commenting positively about how the scheme has contributed to their quality of life
e) Ensuring that the makeup of the membership reflects the local community	<ul style="list-style-type: none"> • The breakdown of membership in terms of age, gender, ethnicity, sexual orientation and disability reflects the local population

Outcome 2	
Prolonging independence, preventing deterioration, and supporting recovery	
Service Requirement	Supporting Evidence
a) Ensuring members keep their independence for as long as possible	<ul style="list-style-type: none"> • The number of members assessed as requiring home care by the local authority compared to that of the non-member population • The number of members admitted to residential care homes compared to that of the non-member population
b) Helping members recover from setbacks and regain their independence	<ul style="list-style-type: none"> • The number of members who report that the support, advice and activities promoted by the HMSN supported their independence better than statutory forms of help.
c) Preventing emergency hospital readmissions amongst members	<ul style="list-style-type: none"> • The number of emergency readmissions amongst members within 28 days of discharge from hospital compared to that of the non-member population • The current situation of all members 90 days after a hospital situation
d) Providing support, advice and activities which best prevents dependency	<ul style="list-style-type: none"> • The types of support, advice and activities available which have been designed by the HMSN to best assist independence • The number and types of third sector organisations that have been engaged by the HMSN to promote independence

Outcome 3	
Ensuring a positive experience for members and providing them with the opportunity to make a positive contribution	
Service Requirement	Supporting Evidence
a) Ensuring that the membership are fully involved in developing and improving the range of support, advice and activities	<ul style="list-style-type: none"> • The number and proportion of members commenting positively about how involved they were in developing the support, advice and activities provided • Management arrangements based on the principles of co-production are in place
b) Ensuring all members are encouraged to develop their own skills to facilitate them to become helpers within the organisation	<ul style="list-style-type: none"> • The number and proportion of members that become helpers • Regular reports from the HMSN identifying how members are recruited and engaged in the organisation and their community

Outcome 4	
Protecting members from avoidable harm and supporting them in a safe environment	
Service Requirement	Supporting Evidence
a) Ensuring a safe environment for all members and helpers	<ul style="list-style-type: none"> • The number and proportion of referrals to adult safeguarding services • Management arrangements are in place that stress the importance of safeguarding, dignity and confidentiality
b) Providing effective safeguarding procedures	<ul style="list-style-type: none"> • CRB checking procedures are in place for all helpers • Effective health and safety procedures are in place • Effective training procedures are in place • Effective complaints procedure is in place

4.2 Performance Indicators: Targets and Milestones

Date	Key performance milestones	Number of members	Including number of vulnerable members	Borough Population coverage	Total number of helping occasions
TBC	<ol style="list-style-type: none"> 1. A business plan has been drawn up that has been agreed by the steering group 2. The HMSN has been established as a Community Interest Company 3. The HMSN becomes operational 	TBC	-	-	TBC
TBC	<ol style="list-style-type: none"> 1. A fully operational database is established to link members and helpers 2. An outcomes report is developed meeting all the outcome service requirements specified. This will then be reported on a quarterly and annual basis to the Harrow Council and the Steering Group 	TBC	-	-	TBC
TBC	Quarterly outcomes report	TBC	TBC	-	TBC
TBC	Annual outcomes report	TBC	TBC	%	TBC
TBC	Quarterly outcomes report (etc)	TBC	TBC	%	TBC
TBC	Annual outcomes report	TBC	TBC	%	TBC
TBC	Annual outcomes report	TBC	TBC	%	TBC
TBC	Annual outcomes report	TBC	TBC	%	TBC
TBC	Annual outcomes report	TBC	TBC	%	TBC